U.S. Department of Labor **Employment Standards Administration** Office of Labor-Management Standards Washington, DC 20210

## FORM LM-4 LABOR ORGANIZATION ANNUAL REPORT Office of Management and Budget

No. 1215-0188

Expires: 11-30-2002

FOR USE ONLY BY LABOR ORGANIZATIONS WITH LESS THAN \$10,000 IN TOTAL ANNUAL RECEIPTS

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. For Official Use Only OLESA 3. (a) AMENDED - If this is an amended report correcting a previously 2. PERIOD COVERED 1. FILE NUMBER DAY filed report, check here: YEAR & Recd (b) TERMINAL — If your organization ceased to exist and this is its 062-512 01012000 From terminal report, see Section X of the instructions and check here: Through 12312000 8. MAILING ADDRESS (Type or print in capital letters.) First Name VICKIE BURKS 062-512 HOTEL EMPL, RESTAURANT EMPL AFL-CIO 410 Last Name LU 719 102 MOSSY SPRINGS TRAIL P.O. Box • Building and Room Number (if any) MADISON, AL 35757 12/2000 letterfeleleteleteleteletel Number and Street City 4. AFFILIATION OR ORGANIZATION NAME 6. DESIGNATION NUMBER 5. DESIGNATION (Local, Lodge, etc.) State ZIP Code + 4 7. UNIT NAME (if any) 19. ADDITIONAL INFORMATION (If more space is needed, attach additional pages properly identified.) Item Number Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.) **TREASURER PRESIDENT** 21 SIGNED: 20. SIGNED: (If other title. (If other title, see instructions.) see instructions.) Telephone Number

Date

Date

Telephone Number

7460

\$5/32

1218

## Complete Items 9 through 18.

- - If "Yes," enter the maximum amount recoverable under the bond for loss caused by any person.
- 13. How many members did your organization have at the end of the reporting period?

- 14. Enter the total value of your organization's assets at the end of the reporting period (cash, bank accounts, equipment, etc.).
- 15. Enter the total liabilities (debts) of your organization at the end of the reporting period (unpaid bills, loans owed, etc.).
- 16. Enter the total receipts of your organization during the reporting period (dues, fees, interest received, etc.). (If \$10,000 or more, your organization must file Form LM-2 or LM-3 instead of this form.)
- 17. Enter the total disbursements made by your organization during the reporting period (per capita tax, loans made, net payments to officers, payments for office supplies, etc.). \$ 3964
- 18. Enter the total payments to officers and employees during the reporting period (gross salaries, lost time payments, allowances, expenses, etc.).

## Please be sure to:

- Enter your union's 6-digit file number in Item 1.
- Report a time period of no more than one year in Item 2.
- Have your union's president and treasurer sign the Form LM-4 in Items 20 and 21.
- FILE ON TIME. Form LM-4 must be filed within 90 days after the end of your union's fiscal year.

Form LM-4 (Revised 2000)

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No

No

No

\$99999

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